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Ezra L. Schacht

Typed or printed name

TIW #

FORM	kial Eliaa)	Filing Date First Named Inventor Art Unit Examiner Name	10/827,16 4/19/2004 Neal B. G 3732 Bumgarne	4	
(to be used for all correspondence after in Total Number of Pages in This Submission	(lai illing)	Attorney Docket Number			
	ENC	LOSURES (Check all	that appl	v)	
Fee Transmittal Form Fee Attached Amendment/Reply After Final Affidavits/declaration(s) Extension of Time Request Express Abandonment Request Information Disclosure Statement Certified Copy of Priority Document(s) Reply to Missing Parts/ Incomplete Application Reply to Missing Parts under 37 CFR 1.52 or 1.5	Rema 1 month	Drawing(s) Licensing-related Papers Petition Petition to Convert to a Provisional Application Power of Attorney, Revocation Change of Correspondence A Terminal Disclaimer Request for Refund CD, Number of CD(s) Landscape Table on Clarks n extension of time fee for app	Address	Appeal Communication to Board of Appeals and Interferences Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) Proprietary Information Status Letter Other Enclosure(s) (please Identify below):	
rm Name		OF APPLICANT, ATTO	RNEY, C	OR AGENT	
gnature Ezra L. Schacht, Pater gnature inted name Ezra L. Schacht ate	- 7	Adjoh	Reg. No.	Today	
16 May 2005 Reg. No. 28,261					

This collection of information is required by 37 CFR 1.5. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and1.14. This collection is estimated to 2 hours to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

Date

16 May 2005

PTO/SB/17 (12-04v2)

Approved for use through 07/31/2006. OMB 0651-0032
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Effective on 12/08/2004. Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).			Complete if Known				
			Application Number	10/827,169			
FEE TRAN	1SM	III I AL	Filing Date	4/19/2004			
For FY 2005 Applicant claims small entity status. See 37 CFR 1.27			First Named Inventor	Neal B. Gittleman Bumgarner, Melba N. 3732			
			Examiner Name				
			Art Unit				
TOTAL AMOUNT OF PAYMENT	(\$)	60.00	Attorney Docket No.		_		
METHOD OF PAYMENT (chec	k all that	apply)					

METHOD OF PAYMENT (check all that apply)							
Check Credit Card Money Order None Other (please identify):							
Deposit Account Deposit Account Number: Deposit Account Name: Deposit Account Name:							
For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)							
Charge fee(s) indicated below Charge fee(s) indicated below, except for the filing fee							
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under 37 CF WARNING: Information on thi	R 1.16 and 1	.17 ecome public. Cred	it card infor	mation should r	ot be included	on this form. P	rovide credit card
information and authorization	on PTO-2038	3.					
FEE CALCULATION							
1. BASIC FILING, SEA	RCH. AND	EXAMINATION	FEES				
	FILING	FEES	SEARC	H FEES		TION FEES	
Application Type	Fee (\$)	Small Entity	Fee (\$)	Small Entity	Fee (\$)	Emall Entity Fee (\$)	Fees Paid (\$)
	300	<u>Fee (\$)</u> 150	500	Fee (\$)	200	100	
Utility				250			
Design	200	100	100	50	130	65	
Plant	200	100	300	150	160	80	· · - · · · · · · · · · · · · · · ·
Reissue	300	150	500	250	600	300	
Provisional	200	100	0	0	0	0	
						Small Entity Fee (\$)	
Each claim over 20 (including Reissues) 50					25		
Each independent claim over 3 (including Reissues) 200					100		
					180		
Total Claims					ependent Claims		
- 20 or HP =		X	_=			<u>Fee (\$)</u>	Fee Paid (\$)
HP = highest number of tota Indep. Claims	Extra Clair			aid (\$)			
		x	=				
HP = highest number of inde	•	s paid for, if greater t	han 3.				
3. APPLICATION SIZE	FEE		46		-141111	61	
If the specification and							each additional 50
sheets or fraction t						in entity) for	each additional 50
<u>Total Sheets</u>	Extra She	<u>ets Numb</u>	er of each	additional 50	or fraction th		(\$) Fee Paid (\$)
100 =		/ 50 =		round up to a	wnoie numbei	7) X	=
4. OTHER FEE(S) Non-English Specifi	ication, \$	130 fee (no smal	l entity di	scount)			Fees Paid (\$)
Other (e.g., late filin	g surcharge	2):1 month late fili	na surchare	10			60.00

SUBMITTED BY		
Signature	Equal School Registration No. 28,261	Telephone 713 523 0515
Name (Print/Type)	Ezra L. Schacht, Patent Agent	Date 16 May 2005

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This collection of information is required by 37 CFR 1.136. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 30 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.



Express Mail No. EO 9009 435 446 US May 16, 2005

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m. L. Schwahl

Washington, D.C. 20231 Date: March 12, 2004

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